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Instructions: Please provide a narrative response and any necessary attachments to address the following questions. (Suggested page limit including attachments, 6-10 pages)

County:

Colusa

Date: 02/03/09

- 1. The county shall ensure that the Community Program Planning Process is adequately staffed. Describe which positions and/or units assumed the following responsibilities:
 - a. The overall Community Program Planning Process

The overall community program planning process was managed by Steffany Ritchie, Program Development Chief, MHSA who has been working in the community program planning process since the original Community Services and Supports planning took place. This PEI planning process was coordinated through a partner agency the Colusa County One-Stop. Marisa Prado, Employment Services Coordinator acting as the PEI Coordinator for the Community Planning Process, was utilized as a bilingual Hispanic staff person to provide culturally sensitive outreach during the planning process. The One Stop Director, Lora Ceccon, along with Cindy Steidlmayer, Children's Mental Health Services Coordinator, Colusa County Office of Education, Steffany Ritchie and various other staff members of Behavioral Health Services including the Children's System of Care Coordinator, Consumer Family Support Coordinator, and a Wraparound Family Specialist, worked on the community needs assessment strategies for outreach with Marisa Prado. This ad hoc committee met frequently to determine stakeholder groups, identify where meetings should be held, and what type of surveys and tools would be used in the planning process.

b. Coordination and management of the Community Program Planning Process

The coordination and management of the Colusa County MHSA Prevention and Early Intervention planning process was conducted by Steffany Ritchie, Program Development Chief, MHSA. Along with partner agencies and various BHS staff, Hand in Hand Preschool Services on the Cachil de he Wintun Reservation, Colusa County Office of Education and the One Stop Partnership, findings were gathered and data processed to determine the priority populations and programs to be developed in Colusa County.

c. Ensuring that stakeholders have the opportunity to participate in the Community Program Planning Process

The Colusa County MHSA PEI planning process was designed to gather meaningful participation from a broad range of stakeholders. We specifically targeted unserved and

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underserved Hispanic and Native American populations, as well as parents and community members involved in the early childhood education, primary education and the youth coordinator for the local Friday Night Live Groups. Other's included agency stakeholders and the Mental Health Board that acts as our oversight and accountability that has a number of consumers actively involved.

The planning process included many different avenues for obtaining information from stakeholders. The survey tool that was created by the planning group was used in focus groups after informational meetings were held. It was also used by the Tribe and other agencies to distribute to individuals who were unable to attend these informational meetings but wanted to give feedback and input as to what the top priorities should be for Colusa County's PEI plan.

The data from the PEI survey and numerous meetings and planning sessions held with community members and stakeholders are what were used to create this PEI Plan. The planning process would begin with an information and training session for participants where they would come to understand the concept of prevention and early intervention in the Mental Health field, and then they would begin to brainstorm with the facilitator as to how that would look in Colusa County. From the brainstorming sessions, we would hold meetings with our planning group that would determine what the community indicated as priorities and how to address those priorities and needs. We also looked at what already existed in Colusa County and discussed with the stakeholders the idea of leveraging what was already here, to get the most for the amount of money we had available for Colusa County. After locating promising practices strategies in the PEI Resource materials, the stakeholders were pleased to look at enhancing already existing activities in the communities and building in a prevention and early intervention piece. We continued the process of meeting with stakeholders, brainstorming and building ideas through their feedback and creating what is now Colusa County's PEI plan over the course of the 6 month planning process.

- 2. Explain how the county ensured that the stakeholder participation process accomplished the following objectives (please provide examples):
 - a. Included representatives of unserved and/or underserved populations and family members of unserved/underserved populations

The meeting held at the Cachil de he Wintun tribe was organized by the Hand in Hand Preschool Director, along with the tribal Marriage Family Therapist at the Community Services site. At that particular focus group, breakfast was provided for the parents and it was held during the morning hours when most of the attendee's children were attending preschool, making it more accessible to these families. This breakfast was sponsored by the Tribe itself. Six community members attended the presentation given by the Director of Behavioral Health, Curtis Boewer, and Steffany Ritchie. After a presentation on MHSA Prevention and Early Intervention, the focus group members discussed ideas and filled out surveys and voiced their desires for the Colusa County PEI Plan.

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The staff member used by the partner agency assisting with the community planning process throughout the county was chosen specifically as a Hispanic bilingual person who could provide bilingual as well as bicultural representation to the underserved Hispanic population in Colusa County. The surveys and all outreach materials publicizing the meetings were done in English and Spanish and meetings were delivered according to the meeting participants. Additionally, this staff member went to key meetings and classes throughout the county where these community members could be found. For example, the migrant camp, the ESL classes held in many different communities, the migrant preschool; migrant camp, Apartment complexes, and Catholic churches and Catechism classes.

- b. Provided opportunities to participate for individuals reflecting the diversity of the demographics of the County, including but not limited to, geographic location, age, gender, race/ethnicity and language.
- ➤ All communities, schools and preschools in the County were accessed through the community planning process; all ages represented in all communities.
- Youth were represented through the Friday Night Live Coordinator and Catechism classes; youth and TAY represented.
- Latino/Hispanics were accessed through utilizing a Hispanic bilingual PEI Community Planning Process Coordinator to provide culturally sensitive outreach during the planning process; all ages in all communities represented.

There were a total of 80 English as a Second Language, Hispanic/Latino students who were trained with the PEI presentation in Spanish by the Coordinator and then held discussion and filled out surveys indicating their desires for the Colusa County Plan. The most common theme continued to be the children and youth as the focus and providing services in a non-traditional setting to those children. Also a focus was providing educational classes to the adults and children focused on "addressing difficult topics with your child", "conflict and anger management", and "positive guidance techniques". The Enhanced Second Step program that includes the parenting component in our Workplan 1 specifically addresses these topics. The theme and requests for the plan remained common throughout the remaining classes and presentations. The following is a more detailed list of the specific meetings and ethnicities of attendees when known:

- ➤ At the Migrant Camp meeting there were 10 Hispanic/Latino attendees.
- At the Pinewood Apartment/low income housing there were 8 Hispanic/Latino attendees for a community meeting.
- ➤ There were 20 Hispanic/Latino attendees at the CSUS GED class presentation.
- ➤ There were 10 parents at the parent meeting in Arbuckle with 6 Caucasian and 4 Hispanic/Latino's.
- ➤ There were 14 Hispanic/Latino attendees at the College Orientation/Career and Health Fair P.E.I. presentation.

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- ➤ There were 15 Hispanic/Latino attendees at a community meeting on September 15, 2008.
- ➤ There were 15 Hispanic/Latino attendees at a community meeting on September 16, 2008.
- ➤ There were 16 Hispanic/Latino attendees at a community meeting on September 15, 2008.
- At Garden Apartment/low income housing there were 6 Hispanic/Latino attendees for a community meeting.
- ➤ There were 14 Youth/TAY attending a presentation held at a Confirmation/Faith Formation meeting for kids in 8th and 9th grade.
- c. Included outreach to clients with serious mental illness and/or serious emotional disturbance and their family members, to ensure the opportunity to participate.

The community planning process included information training and updates to the Mental Health Board who acts as the oversight and accountability to all MHSA planning. This board currently has 9 members, of whom 7 are consumers or family members. A focus group to train on the PEI concepts as it began to roll out was also held with consumers and family members, as is the practice with all Mental Health Services Act new components in Colusa County. Surveys were presented through the Consumer Family Support Coordinator and through the Depression Bipolar Support Alliance Meetings.

- 3. Explain how the county ensured that the Community Program Planning Process included the following required stakeholders and training:
 - Participation of stakeholders as defined in Title 9, California Code of Regulations (CCR), Chapter 14, Article 2, Section 3200.270, including, but not limited to:
 - Individuals with serious mental illness and/or serious emotional disturbance and/or their families
 - Providers of mental health and/or related services such as physical health care and/or social services
 - Educators and/or representatives of education
 - Representatives of law enforcement
 - Other organizations that represent the interests of individuals with serious mental illness and/or serious emotional disturbance and/or their families

In April 2008 we began the process of community focus groups and meetings related to MHSA Prevention and Early Intervention. The Colusa County process is set up to keep our stakeholders, consumers and family members, agencies and other organizations abreast of each MHSA component and the ongoing MHSA programs. We do this through public relations via a MHSA newsletter that is mailed out to all consumers, monthly newspaper articles and community briefs, and collaborative meetings where staff members share the information regarding components as they are being rolled out. The Director of BHS keeps the Board of Supervisors trained and prepared through

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verbal reports bi—weekly to the Board, and all components are addressed. We had representatives from the schools and other collaborative agencies work together to develop the presentation and survey tools that were to be used during the community planning process. Before doing a survey, the presentation/training on the PEI component itself is done and a question and answer period is opened up. Staff then walks through the survey question by question as participants are asked to fill them out. The Mental Health Board acts as oversight to all MHSA component roll outs and we also have a Consumer Family Support Group that is involved. The Native American Collaboration, which provides for a MFT to the local Cachil de he Wintun tribe via the MHSA in Colusa County, was included in setting up the meeting at the local tribe community services building and then was actively involved in handing out surveys to her clients that were unable to attend the meeting and giving them information regarding the PEI planning that was occurring in the county.

Meetings for PEI were attended by all of the recommended stakeholder groups as well as extensive attendance by un and underserved target populations via outreach through the PEI Coordinator and one on one meetings with the Program Development Chief and Key informants throughout the community. The described key informants and meetings included representation from the following groups: individuals and/or families members of individuals with SMI and SED; local Health and Human Services; Child Protective Services; Adult Protective Services; Educators and administrators of education; Probation and the Sheriff's Office; Board of Supervisors; Native American; Latino/Hispanic; and One Stop Employment Development Department.

b. Training for county staff and stakeholders participating in the Community Program Planning Process.

Staff is updated regularly on the MHSA plans that are being prepared and the draft plan is distributed and discussed for input. Various appropriate staff was chosen to work on the Community Program Planning Process and developed the tools and presentation materials that were used, as well as assisting in the process itself. The Program Development Chief works with all staff and stakeholders prior to any work being done on a specific component to explain the process, guidelines, and expectations of those working on the plan. This is done through small workgroups, one-on one meeting, as well as including staff and other partners in the PEI webcasts and teleconferences that have occurred.

- 4. Provide a summary of the effectiveness of the process by addressing the following aspects:
 - The lessons learned from the CSS process and how these were applied in the PEI process.

The main lesson learned from the CSS process was that it was possible, however, proved very difficult to get people to come to meetings for a number of reasons. We have over the past 3 years, taken what we learned and applied it successfully by

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holding our meetings in conjunction with other meetings and classes that are already taking place in the county. For example, one of our underserved populations is Hispanics. To tap into this group for the Community Program Planning Process we met them during their English as a Second Language class time and used 30 minutes of that time to engage them in meaningful planning discussion with a bilingual Hispanic staff member. This proved very effective. Another example is the Native American families whose meeting was set during the morning when most of the mother's children who attended were in class during the meeting time, and they were served breakfast by the Tribe. Previously, we set all of our meetings in the evening and were separate 2 hour long focus groups at times. We have found that having different formats for different groups of people and being flexible to this has been worthwhile.

b. Measures of success that outreach efforts produced an inclusive and effective community program planning process with participation by individuals who are part of the PEI priority populations, including Transition Age Youth.

Through the needs assessment surveys all of the PEI priority populations were targeted through English as a Second Language Classes, General Education Diploma Classes, School meetings, Family Resource Center meetings, Migrant Camp, Apartment complexes, Sacramento State University High School Equivalency Classes and an information day for Colusa County residents, Catholic Church and Catechism classes. The needs assessments indicate the overwhelming majority of votes for children, youth and TAY to be targeted with Colusa County's PEI plan.

5. Provide the following information about the required county public hearing:

a. The date of the public hearing: November 10, 2008

A second public hearing was held on December 17, 2008 following a discussion with the MHSA OAC Colusa County Liaison who pointed out through the regulations that although Colusa County had started the 30 day public comment period and held a Public Hearing during that time, the regulations stated that the hearing needed to be held at the *close* of the 30 day public comment period.

b. A description of how the PEI Component of the Three-Year Program and Expenditure Plan was circulated to representatives of stakeholder interests and any other interested parties who requested it.

A copy of the Colusa County MHSA Prevention and Early Intervention Plan will be delivered to all Mental Health Board Members. A copy of the Public Notice for Review and Comment will be posted in the lobby of the Colusa County Behavioral Health Building, and all of the Colusa County Free Library Branches. A hard copy of the Plan will be available at these sites. An electronic copy of the Plan will be posted on the Mental Health Network of Care website at the following link: http://colusa.networkofcare.org/mh/home/index.cfm. Additional copies will be circulated

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to all Mental Health and Substance Abuse Services Staff and mailed to the Board of Supervisors.

c. A summary and analysis of any substantive recommendations for revisions.

During the first public hearing where a presentation was given with regards to the decisions made, the planning process, and the final draft plan, a public comment was made by a new individual to the community, "I am very impressed". Board members also gave positive feedback to the collaborative spirit of the plan that will benefit local partner agencies and help to expand quality programs in Colusa County for our youngest citizens and embed Mental Health services even deeper into the schools and outlying communities that make up Colusa County.

d. The estimated number of participants:

Approximately 250 individuals via the community program planning process, key informants, and small focus groups have participated. We had 8 people attend the public hearing on December 17th, which is the average number of attendees for all of our MHSA public hearings. We have much participation in planning; however, very few people come to comment as they know they have opportunity for input to our plans throughout all of our planning processes. We are a small county that cares what our consumers and partners have to say regarding our plans and programs.

Note: County mental health programs will report actual PEI Community Program Planning expenditures separately on the annual MHSA Revenue and Expenditure Report.

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County: Colusa PEI Project Name: PEIPS/ESS Date: Complete one Form No. 3 for each PEI project. Refer to Instructions that follow the form. Date: 02/03/09

		Age Group			
1. PEI Key Community Mental Health Needs	Children and Youth	Transition- Age Youth	Adult	Older Adult	
Select as many as apply to this PEI project:					
 Disparities in Access to Mental Health Services Psycho-Social Impact of Trauma At-Risk Children, Youth and Young Adult Populations Stigma and Discrimination Suicide Risk 					
				Marine I	

	Age Group				
2. PEI Priority Population(s) Note: All PEI projects must address underserved racial/ethnic and cultural populations.	Children and Youth	Transition- Age Youth	Adult	Older Adult	
A. Select as many as apply to this PEI project:					
 Trauma Exposed Individuals Individuals Experiencing Onset of Serious Psychiatric Illness Children and Youth in Stressed Families Children and Youth at Risk for School Failure 					
5. Children and Youth at Risk of or Experiencing Juvenile Justice Involvement6. Underserved Cultural Populations					

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B. Summarize the stakeholder input and data analysis that resulted in the selection of the priority population(s).

The Colusa County MHSA PEI planning process was designed to gather meaningful participation from a broad range of stakeholders. We specifically targeted unserved and underserved Hispanic and Native American populations, as well as parents and community members involved in the early childhood education, primary education and the youth coordinator for the local Friday Night Live Groups. Other's included agency stakeholders and the Mental Health Board that acts as our oversight and accountability that has a number of consumers actively involved.

The planning process included many different avenues for obtaining information from stakeholders. The survey tool that was created by the planning group was used in focus groups after informational meetings were held. It was also used by the Tribe and other agencies to distribute to individuals who were unable to attend these informational meetings but wanted to give feedback and input as to what the top priorities should be for Colusa County's PEI plan.

The data from the PEI survey and numerous meetings and planning sessions held with community members and stakeholders are what were used to create this PEI Plan. The planning process would begin with an information and training session for participants where they would come to understand the concept of prevention and early intervention in the Mental Health field, and then they would begin to brainstorm with the facilitator as to how that would look in Colusa County. From the brainstorming sessions, we would hold meetings with our planning group that would determine what the community indicated as priorities and how to address those priorities and needs. We also looked at what already existed in Colusa County and discussed with the stakeholders the idea of leveraging what was already here, to get the most for the amount of money we had available for Colusa County. After locating promising practices strategies in the PEI Resource materials, the stakeholders were pleased to look at enhancing already existing activities in the communities and building in a prevention early intervention piece. We continued the process of meeting with stakeholders, brainstorming and building ideas through their feedback and creating what is now Colusa County's PEI plan over the course of the 6 month planning process.

The top priorities of the 201 needs assessments were:

- > 34% of respondents indicated the need for Therapy and Case Management in a non-traditional setting
- > 28% of respondents indicated the need for education provided for parents to weather crisis successfully; and
- > 17% of respondents indicated the need for help with supportive relationships for parents to provide a healthy environment for their children.

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Target populations chosen were:

- > 64% children and youth
- > 20% transition age youth

The top 3 educational classes chosen were:

- > Positive guidance techniques;
- > Addressing difficult topics with children; and
- Conflict and anger management

Services and Supports that need to be developed to ensure the outcomes were listed as:

- 1. Culturally sensitive services;
- 2. Services provided during non-traditional hours and/or non-traditional settings;
- 3. Interpreter; and
- 4. Child Career Resource Center

3. PEI Project Description: (attach additional pages, if necessary)

Prevention and Intervention for Pre School (PEIPS)/ Enhanced Second Step (ESS)

This project will implement the Second Step Program throughout all of the Colusa County Schools, Head Start and Preschools, and the local Cachil dehe Wintun tribal preschool and after school program, Hand in Hand. It will enhance the Second Step program within the school districts by adding the parenting class component to a select group of school sites. The staffing will not allow for these classes to occur in all school sites, so we anticipate rotating the classes if the outcomes of the project and the parenting class component are substantial. The first place we will hold the parenting classes will be at Hand in Hand as the Native Americans are identified as one of our un and underserved populations. Monthly classes will concur with the curriculum being taught to the students in Second Step and a contact number serving as a parent advice line staffed by the individual working with the parents in the class will be available for use as needed. The Second Step program identifies target children based on the 11-25% scale via the teacher assessment. The PEIPS/ESS program will target the top 1-10% and will provide a mental health screening to all of these children. Foster

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care youth will be identified as the target population regardless of the results of their assessment. To respond to the communities request for services in non-traditional settings we felt that the Direct Schools program as a guide to how services were delivered was the optimal choice in filling this need. The services will be provided outside of the walls of the mental health clinic, in the schools, homes and communities of the children and families. For example, if a child is assessed and further needs to access treatment, those services will be provided to the parents in their home if it is desired, or at other community partner sites. It could be a faith based partner giving access to a social hall for a parent meeting, a community based agency or county agency partner providing space for after hours classes or counseling times. All services are going to be weaved in a way that will be of the greatest benefit to the children and their families providing ease and comfort of access. We will not provide a one-way street to services, there will be access through many avenues depending solely on individual family needs.

In addition to translating materials and hiring bilingual and/or bicultural staff for project development and selection and community planning, Colusa County continually strives to reduce disparities through our outreach and system development of every new MHSA program. Ways we accomplish this range from staff hired to reflect the communities we serve and a distinct way of serving un and underserved communities. With a 75% Hispanic/Latino population in the county, it is necessary in order to serve our consumers, to go into the Migrant Camps, English as a Second Language Classes, Catholic churches and other venues where we will be more likely to find the population and find out where they are able to access the services, and then provide those services in the manner in which they are requested. It is the same for all special populations we serve, as well as non-special populations. When we are approaching any new project or service we look to those that we serve to find out where and how would be the most culturally competent manner to serve them in, and then model the programs or services to meet those needs.

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PEI PROJECT SUMMARY

4. Programs

Program Title	Proposed number of individuals or families through PE expansion to be served through June 2009 by type		Number of months in operation through June 2009
	Prevention	Early Intervention	
Prevention and Early Intervention for Pre-School/ Enhanced Second Step (PEIPS/ESS)	Individuals: 50 Families:	Individuals: 320 Families:	Approximately 6
	Individuals: Families:	Individuals: Families:	
TOTAL PEI PROJECT ESTIMATED UNDUPLICATED COUNT OF INDIVIDUALS TO BE SERVED	Individuals: 320 Families:	Individuals: 50 Families:	

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5. Linkages to County Mental Health and Providers of Other Needed Services

Services will be linked and coordinated accordingly from assessment to clinical treatment via the MHSA Children's System of Care Coordinator and Direct Schools Program. Direct Schools will provide onsite therapist and case manager services for children identified in the screening process as needing treatment services who fit the criteria for Mental Heath services in the county. If any child is unable to receive services within the county a process will be set up whereby the Children's System of Care Coordinator will help link those children to other services.

6. Collaboration and System Enhancements

This collaboration leverages resources by building on an already existing Colusa County Office of Education program, MHSA Direct Schools and Children's System of Care programs. It also provides collaboration with the Cachil dehe Wintun Colusa Indian Community Council. The goal of this project is to provide a comprehensive program and coordinated services in a non-traditional way through new collaborations and setting up the idea of mental health services to families and children at the preschool age within the educational setting. This project provides a PEI key to transformation by providing mental health early intervention services to sites outside of the typical mental health building bridging the gap for pre-k – 3rd graders and their families and providing both prevention and early intervention to our youngest citizens as we build their futures and educate their parents and teachers on early onset mental illness.

7. Intended Outcomes

The intended outcomes of this project are:

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- > To enhance the social and emotional development of 370 children in Colusa County;
- To increase the likelihood that they will succeed in school;
- To increase their personal competencies related to life success;
- > To decrease the need for more intensive and costly services as the children grow older;
- > To provide training on mental health for those working with children and youth; and
- > To provide outreach and education to children, youth, families, school staff and communities to increase awareness of early intervention of mental health issues

8. Coordination with Other MHSA Components

This program will be coordinated with Direct Schools Services, Children's System of Care and the Native American Collaboration, all MHSA programs. The Direct Schools staff will provide a case manager and therapist to provide intakes and screenings and assessments as needed, and then move into clinical treatment if necessary, seeing the children in the schools, homes and communities they live in. Through the Native American Collaboration (NAC) we will provide the same level of intervention services to Hand in Hand preschool and after school children, however we will utilize the MFTi that MHSA funding provides in the NAC to provide the clinical treatment if necessary, and the CSOC to provide case management, and education to families that will provide links to supportive services.

9. Additional Comments (optional)

Key milestones and anticipated timeline for milestones:

Sign MOU with CCOE and begin enhancement to existing program through Coordinator and aides.	> 09-10 School Year
Initiate activities and begin pilot of parenting classes that are complimentary to the Second Step information and techniques being used with the children in the program.	 09-10 School Year - February is target date for first parent meeting.
With parent input via meetings with Coordinator develop	➤ February 2009, as soon as plan approval.

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County: Colusa PEI Project Name: Friday Night Live/Club Live Extension Project Date: 02/03/09 Complete one Form No. 3 for each PEI project. Refer to Instructions that follow the form.

	Age Group				
1. PEI Key Community Mental Health Needs	Children and Youth	Transition- Age Youth	Adult	Older Adult	
Select as many as apply to this PEI project:					
 Disparities in Access to Mental Health Services Psycho-Social Impact of Trauma At-Risk Children, Youth and Young Adult Populations Stigma and Discrimination Suicide Risk 					

		Age Group			
2. PEI Priority Population(s) Note: All PEI projects must address underserved racial/ethnic and cultural populations.	Children and Youth	Transition- Age Youth	Adult	Older Adult	
B. Select as many as apply to this PEI project:					
 Trauma Exposed Individuals Individuals Experiencing Onset of Serious Psychiatric Illness Children and Youth in Stressed Families Children and Youth at Risk for School Failure Children and Youth at Risk of or Experiencing Juvenile Justice Involvement 					

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6. Underserved Cultural Populations	\boxtimes			

B. Summarize the stakeholder input and data analysis that resulted in the selection of the priority population(s).

The Colusa County MHSA PEI planning process was designed to gather meaningful participation from a broad range of stakeholders. We specifically targeted unserved and underserved Hispanic and Native American populations, as well as parents and community members involved in the early childhood education, primary education and the youth coordinator for the local Friday Night Live Groups. Other's included agency stakeholders and the Mental Health Board that acts as our oversight and accountability that has a number of consumers actively involved.

The planning process included many different avenues for obtaining information from stakeholders. The survey tool that was created by the planning group was used in focus groups after informational meetings were held. It was also used by the Tribe and other agencies to distribute to individuals who were unable to attend these informational meetings but wanted to give feedback and input as to what the top priorities should be for Colusa County's PEI plan.

The data from the PEI survey and numerous meetings and planning sessions held with community members and stakeholders are what were used to create this PEI Plan. The process of writing the plan came through analyzing the data with partner agency members from the Schools Mental Health Services, Special Education, the One Stop Partnership, Director of the Cachil de he Wintun Tribe, and Substance Abuse Counselor, Terri Rivera. The planning process would begin with an information and training session for participants where they would come to understand the concept of prevention and early intervention in the Mental Health field, and then they would begin to brainstorm with the facilitator as to how that would look in Colusa County. From the brainstorming sessions, we would hold meetings with our planning group that would determine what the community indicated as priorities and how to address those priorities and needs. We also looked at what already existed in Colusa County and discussed with the stakeholders the idea of leveraging what was already here, to get the most for the amount of money we had available for Colusa County. After locating promising practices strategies in the PEI Resource materials, the stakeholders were pleased to look at enhancing already existing activities in the communities and building in a prevention early intervention piece. We continued the process of meeting with stakeholders, brainstorming and building ideas through their feedback and creating what is now Colusa County's PEI plan over the course of the 6 month planning process.

The top priorities of the 201 needs assessments were:

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- > 34% of respondents indicated the need for Therapy and Case Management in a non-traditional setting
- > 28% of respondents indicated the need for education provided for parents to weather crisis successfully; and
- > 17% of respondents indicated the need for help with supportive relationships for parents to provide a healthy environment for their children.

Target populations chosen were:

- > 64% children and youth
- > 20% transition age youth

The top 3 educational classes chosen were:

- > Positive guidance techniques;
- > Addressing difficult topics with children; and
- > Conflict and anger management

Services and Supports that need to be developed to ensure the outcomes were listed as:

- 1. Culturally sensitive services;
- 2. Services provided during non-traditional hours and/or no traditional settings;
- 3. Interpreter; and
- 4. Child Career Resource Center

3. PEI Project Description: (attach additional pages, if necessary)

Friday Night Live (FNL) and Club Live (CL) Extension project will provide expansion of the existing FNL and CL groups by developing coordinators to assist in the growth of the program, making it countywide. These programs are optimally situated to intervene with youth at risk for school failure. Assessment can often identify past trauma, substance abuse, suicide risk and juvenile justice involvement. By expanding these programs we can bridge a gap that will find these children and link them to screening and appropriate referrals through the coordinators. At this time only 3 groups meet regularly in Colusa County due to lack of available leaders and lack of funding to provide any stipends to volunteers to build a core group of leaders/facilitators that can train the youth leaders and parent volunteers in each community. The

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goal is to build these youth leaders through leveraging additional California Friday Night Live funding. There are 4 additional school districts in the county that have no CL or FNL and this expansion would build programs specifically in 3 additional high schools and 4 elementary and junior high schools. The Extension will provide the opportunity for growth to the outlying rural area of Stonyford, Elk Creek School District, where the Native American's comprise 52.6% of the district, an underserved population in Colusa County. We will provide stipends to adult coordinator/facilitators in each community who will work with the existing FNL Colusa Coordinator, who is a Counselor at Colusa County Department of Behavioral Health. We will provide a formal speaker to come in and train the volunteers and coordinators and also budget for a countywide event where all of the groups will be involved in a stigma reduction and student body emotional well being campaign.

In addition to translating materials and hiring bilingual and/or bicultural staff for project development and selection and community planning, Colusa County continually strives to reduce disparities through our outreach and system development of every new MHSA program. Ways we accomplish this range from staff hired to reflect the communities we serve and a distinct way of serving un and underserved communities. With a 75% Hispanic/Latino population in the county, it is necessary in order to serve our consumers, to go into the Migrant Camps, English as a Second Language Classes, Catholic churches and other venues where we will be more likely to find the population and find out where they are able to access the services, and then provide those services in the manner in which they are requested. It is the same for all special populations we serve, as well as non-special populations. When we are approaching any new project or service we look to those that we serve to find out where and how would be the most culturally competent manner to serve them in, and then model the programs or services to meet those needs.

4. Programs

Program Title	Propos	sed number of	Number of months in
i rogram mae		families through PEI	operation through
		on to be served	June 2009
		une 2009 by type	04110 2000
	Prevention	Early Intervention	
	Individuals:	Individuals: 100	Approximately 6
Friday Night Live/Club Live Extension Project	100	Families:25	/ Approximatory o
Triady riight Elvo, Glab Elvo Extension Project	Families:25	T GITIMOS.25	
	Individuals:	Individuals:	
	Families:	Families:	
	Individuals:	Individuals:	
	Families:	Families:	*
	Individuals:	Individuals:	
	Families:	Families:	
	Individuals:	Individuals:	
	Families:	Families:	
	Individuals:	Individuals:	
	Families:	Families:	
TOTAL PEI PROJECT ESTIMATED	Individuals:	Individuals: 100	
UNDUPLICATED COUNT OF INDIVIDUALS	100	Families: 25	
TO BE SERVED	Families:25		
	L,	MUCA P	Vention and Early Intervention

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Proposed number of individuals or families through PEI expansion to be served through June 2009 by type
,

5. Linkages to County Mental Health and Providers of Other Needed Services

Services will be linked and coordinated via the monthly Children's Multi Disciplinary Team where the CCDBH Group Coordinator will bring to the group any referrals for linkage through the Children's System of Care, CPS, One Stop Partnership, Colusa County Office of Education, Direct Schools, Colusa Wraparound, Department of Health and Human Services, Sheriff's Office, Probation and other agencies. A system of training the volunteer adult coordinators regarding referrals to the MDT will be implemented to ensure access to the linkages necessary for those identified as being in need of more comprehensive services. If further mental health services are needed to be done in the field, the Direct Schools Program that provides case management and counseling services in the schools and communities where the youth live will be utilized.

6. Collaboration and System Enhancements

This collaboration leverages resources by expanding on an already existing Colusa County Behavioral Health, Substance Abuse Program. Collaboration with the local One-Stop to provide linkages to additional youth programs in the county will be implemented along with the system enhancement of training coordinators of these youth programs on how to refer a client through the Children's MDT and create a network that will expand the existing county resources to another sector of the communities in need of those services. It will enhance the service delivery as well as the access to those services.

Form No. 3

This project provides a PEI key to transformation by providing mental health prevention and early intervention services to sites outside of the typical mental health building for youth and TAY.

7. Intended Outcomes

The intended outcomes of this project are:

- > Increasing knowledge of social, emotional and behavioral issues;
- Increase the knowledge of risk and protective factors;
- Improve school performance;
- Reduce school drop-out;
- > Reduce expulsion and suspensions;
- > Reduce isolation; and
- Increase appropriate help-seeking.

8. Coordination with Other MHSA Components

This program will be coordinated with the Children's System of Care and Direct Schools MHSA programs. The Direct Schools staff will provide a case manager and therapist to provide intakes and screenings and assessments as needed, and then move into clinical treatment if necessary, seeing the children in the schools, homes and communities they live in. The Children's System of Care will provide the linkage and coordination through the inter-agency Multi Disciplinary Team to provide the necessary referral to services. The CSOC also has Full Service Partnership Slots for youth identified in need and who fit the criteria for those slots.

9. Additional Comments (optional)

Form No. 3

Key milestones and anticipated timeline for milestones:

Sign MOU with One-Stop Partnership to provide stipends for Coordinators	February 09
Initiate activities and begin recruitment of Coordinators for specific populations and communities designated as expansion areas for FNL through team meetings led by the FNL Coordinator/ BHS Counselor Terri Rivera and youth coordinators.	Begin March 09 – secure recruitment for all school sites to begin activities in summer of 09.
With youth input via meetings with Coordinators develop activities that will be pursued in each community.	Beginning in August 2009 and ongoing throughout the 09-10 school year.
Research and develop tools to be utilized by MH staff for further treatment services. This first school year as we are getting a late start with implementation, we will provide inkind services through other Direct Schools MHSA staff and choose the top 3% of children to receive additional screening and treatment services. The following 09-10 School Year we will hire up the Direct Schools Case Manager and Counselor that are in the plan to provide 100% of the services described to all of the children estimated to be served.	 Begin development February 2009, as soon as plan approval. Hire DSS staff in 09-10 Fiscal Year – June or July to be prepared for start of school year.
Develop referral protocol with Children's System of Care Coordinator and provide training of the protocol to Adult Coordinators.	February 2009, as soon as plan approval.
Program review and reauthorization	Upon completion of one year of program, we will review and reauthorize.

PEI Revenue and Expenditure Budget Worksheet

Form No. 4

Instructions: Please complete one budget Form No. 4 for each PEI Project and each selected PEI provider.

Revised

County Name:

Colusa

02/03/09 Date:

PEI Project Name: PEIPS/ESS

Provider Name (if known): Colusa County Office of Education and Behavioral Health

Services

Intended Provider Category: County

Agency

Proposed Total Number of Individuals to be served:

FY 07-08 0 FY 08-09 370

Total Number of Individuals currently being served:

FY 07-08 0 FY 08-09 0

Total Number of Individuals to be served through PEI Expansion:

370 FY 07-08 FY 08-09

Months of Operation:

FY 07-08 0 FY 08-09 Approx. 8

	Total Progra	am/PEI Projec	t Budget
Proposed Expenses and Revenues	FY 07-08	FY 08-09	Total
A. Expenditure			
Personnel (list classifications and FTEs)			
a. Salaries, Wages			
Direct Schools Counselor III (.75)	0	\$37,000	\$37,00
Direct Schools Case Manager (1.0)	0	\$29,000	\$29.00
			\$
b. Benefits and Taxes @ %			\$(
c. Total Personnel Expenditures	\$0	\$66,000	\$66.00
2. Operating Expenditures			
a. Facility Cost	\$0	\$0	\$
b. Other Operating Expenses	\$0	\$10,000	\$10,00
c. Total Operating Expenses	\$0	\$76,000	\$76,00
3. Subcontracts/Professional Services (list/itemize all subcontracts/Professional Services)	ontracts)		
Colusa County Office of			
Education-Coordinator and Aides	\$0	\$75,000	\$75,00
	\$0	\$0	\$
a. Total	\$0	\$0	\$
Subcontracts	\$0	\$75,000	\$75,00
4. Total Proposed PEI Project Budget	\$0	\$151,000	\$151,00
B. Revenues (list/itemize by fund source)			
Based on approx. 37 Medi-Cal Clients seen Medi-Cal	\$0	\$15,984	\$15,98

PEI Revenue and Expenditure Budget Worksheet

by counselor and 20 by Case Manager				
	EPSDT	\$0	\$5,016	\$5,016
		\$0	\$0	\$0
1. Total Revenue		\$0	\$21,000	\$21,000
5. Total Funding R	equested for PEI Project	\$0	\$130,000	\$130,000
6. Total In-Kind Co	ntributions	\$0	\$0	\$0

Form No. 4

Instructions: Please complete one budget Form No. 4 for each PEI Project and each selected PEI provider.

Revised Date: 02/03/09

County Name:

Colusa

PEI Project Name: Friday Night Live/Club

Live Extension Project

Provider Name (if known): Colusa County

Behavioral Health Services

Intended Provider Category: County

Agency

Proposed Total Number of Individuals to be served:

FY 07-08 0 FY 08-09 250

Total Number of Individuals currently being served:

FY 07-08 <u>0</u> FY 08-09 <u>35</u>

Total Number of Individuals to be served through PEI Expansion:

FY 07-08 <u>0</u> FY 08-09 <u>250</u>

Months of Operation:

FY 07-08 0

FY 08-09 Approx. 8

	Total Program/PEI Project Budget			
Proposed Expenses and Revenues	FY 07-08	FY 08-09	Total	
A. Expenditure				
Personnel (list classifications and FTEs)				
a. Salaries, Wages				
	\$0	\$0	\$0	
			\$0	
			\$0	
b. Benefits and Taxes @ %			\$0	
c. Total Personnel Expenditures	\$0	\$0	\$0	
2. Operating Expenditures				
a. Facility Cost	\$0	\$0	\$0	
b. Other Operating Expenses	\$0	\$0	\$0	
c. Total Operating Expenses	\$0	\$5,000	\$5,000	
3. Subcontracts/Professional Services (list/itemize all	subcontracts)			
Colusa County One-Stop - Stipends	\$0	\$10,000	\$10,000	
Training/Speaker	\$0	\$5,000	\$5,000	

Instructions for Preparing the PEI Revenue and Expenditure Budget Worksheet and Budget Narrative (Form No. 4)

	\$0	\$0	\$0
a. Total Subcontracts	\$0	\$15,000	\$15,000
4. Total Proposed PEI Project Budget	\$0	\$20,000	\$20,000
B. Revenues (list/itemize by fund source)			
	\$0	\$0	\$0
	\$0	\$0	\$0
	\$0	\$0	\$0
1. Total Revenue	\$0 \$0		\$0
5. Total Funding Requested for PEI Project	\$0	\$20,000	\$20,000
6. Total In-Kind Contributions	\$0	\$0	\$0

PEI Administration Budget Worksheet

Form	
No.5	

County:

Colusa

Pate: Revised 02/03/09

	Client and Family Member, FTEs	Total FTEs	Budgeted Expenditure FY 2007-08	Budgeted Expenditure FY 2008-09	Total
. Expenditures					
1. Personnel Expenditures					
a. PEI Coordinator					\$0
b. PEI Support Staff					\$0
c. Other Personnel (list all classifications)					\$0
					\$0
	***				\$0
	***				\$0
					\$0
d. Employee Benefits					\$0
e. Total Personnel Expenditures			\$0	\$0	\$0
2. Operating Expenditures		CONTRACTOR OF THE STATE OF THE			
a. Facility Costs			\$0	\$0	\$0
b. Other Operating Expenditures			\$0	\$0	\$0
c. Total Operating Expenditures			\$0	\$0	\$0
3.County Allocated Administration					
a. Total County Administration Cost			\$0	\$0	\$0
4. Total PEI Funding Request for County Administration Budget			\$0	\$0	\$0
. Revenue					
1. Total Revenue					\$0
. Total Funding Requirements			\$0	\$0	\$0
. Total In-Kind Contributions			\$0	\$29,000	\$29,000

Form No. 6

Instruction: Please provide a listing of all PEI projects submitted for which PEI funding is being requested. This form provides a PEI project number and name that will be used consistently on all related PEI project documents. It identifies the funding being requested for each PEI project from Form No. 4 for each PEI project by the age group to be served, and the total PEI funding request. Also insert the Administration funding being requested from Form No.5 (line C).

County:	Colusa	
Date:	Revised 02/03/09	

		Fiscal Year			Funds Requested by Age Group			
#	List each PEI Project	FY 07/08	FY 08/09	Total	*Children, Youth, and their Families	*Transition Age Youth	Adult	Older Adult
1	Prevention Early Intervention Pre- School/Enhanced Second Step	\$0	\$130,000	\$130,000	\$130,000	\$0	\$0	\$0
2	Friday Night Live/Club Live Extension Project	\$0	\$20,000	\$20,000	\$3,000	\$17,000		
	NAC TREE			\$0				
				\$0				
				\$0				
				\$0				
				\$0				
				\$0				
			6	\$0				
		,			v			
	Total PEI Funds Requested:	\$0	\$150,000	\$150,000	\$133,000	\$17,000	\$0	\$0

^{*}A minimum of 51 percent of the overall PEI component budget must be dedicated to individuals who are between the ages of 0 and 25 ("small counties" are excluded from this requirement).

Colusa County Department of Behavioral Health
MHSA Prevention and Early Intervention

Budget Narrative – Workplan 1

Revised 02/03/09

Project Name: Prevention Early Intervention - Pre School/ Enhanced Second Step

A. Expenditures:

- 1. Personnel Expenditures:
- a. Salaries, wages: New additional personnel expenditures requested are for a MHSA Direct Schools Counselor .75 fte budgeted at \$37,000 and a MHSA Direct Schools Case Manager 1.0 fte budgeted at \$29,000. These staff will provide the services at the sites and in the homes and communities where the children and families live.

The total staffing budget is \$66,000.

- 2. Operating Expenditures:
- b. Other Operating Expenses: Operating expenses including curriculum for pre-schools, office supplies to conduct the parenting classes, screening tools and mileage and travel cost are included in this request.

The total operating expense budget is \$10,000.

3. Subcontracts/Professional Services: Colusa County Office of Education will be providing a Coordinator and Aides to implement the Enhanced Second Step program to the schools, pre-schools and Cachil de he Wintun Tribal Daycare and After School Program, as well as the Second Step Parenting Curriculum. This is expanding the traditional Second Step program provided in the County and is a contribution for the portion of services that will be enhanced in the County. The portion of funding that will be dedicated to the Aides will be \$50,000, and \$25,000 will be for the Coordinator.

The total Subcontracts/Professional Services budget is \$75,000.

- Total Proposed PEI Project Budget:
- b. Revenues: Revenue is estimated to be at \$15,984 from Medi-Cal and \$5,016 from EPSDT for a total of \$21,000. These proposed revenue amounts come from the Counselor seeing approximately 37 clients and the Case Manager seeing 20 clients in the top 1-10% high need children that are identified in the PEIPS program.

The total proposed budget for Workplan 1, PEIPS/ESS is \$151,000 and the revenue for this Workplan is estimated to be \$21,000 making the total request \$130,000.

Colusa County Department of Behavioral Health MHSA Prevention and Early Intervention Budget Narrative – Workplan 2 November 10, 2008

Project Name: Friday Night Live/Club Live Extension Project

- 2. Operating Expenditures:
- b. Other Operating Expenses: Operating expenses include curriculum for Coordinator's and Youth Leaders to use at countywide meetings; Supplies to coordinate countywide events, art supplies, office supplies, incentives for youth activities and promotion of Friday Night Live in the communities.

The total operating expense budget is \$5,000.

3. Subcontracts/Professional Services: Colusa County One Stop will be providing stipends to Coordinators and Youth Leaders to expand the groups all over the county. The budget requested for stipends is \$10,000.

The request for Training and Speakers in the amount of \$5,000 is for a countywide event that will train all youth leaders, adult coordinators and existing FNL Coordinator and advisors with 3 trainings held throughout the year.

The total Subcontracts/Professional Services budget is \$15,000.

The total proposed budget for Workplan 2, FNL/CL Extension Project is \$20,000.

Colusa County Department of Behavioral Health
MHSA Prevention and Early Intervention
Budget Narrative – Administration
Revised 02/03/09

- 4. Total Revenue:
- d. Total In-Kind Contributions: The total in-kind contribution of \$29,000 includes:
 - .13 Fiscal Administrative Officer to provide cost reports and county contracts support, at \$10,000; and
 - .13 Program Development Chief, MHSA to provide oversight of the program working with the coordinators and subcontractors and delivering DMH reports as necessary at \$10.000.
 - > 3.75% Total County Administration Funding Requirements include \$9,000.

These funds will be paid for out of the Mental Health Realignment Funds.

Total In-Kind Contribution is \$29,000.

Instructions for Completing the Local Evaluation of a PEI Project (Form No. 7)

County: Colusa Date: 02/03/09

Check this box if this is a "very small county" (see glossary for definition) and the county is electing the option to waive the requirement to conduct a local evaluation of a PEI project. Very small counties electing this option do not need to complete the remainder of this form.